

PCT

FEE CALCULATION SHEET

Annex to the Demand

International application No. PCT/KR03/001754	For International Preliminary Examining Authority use only	
Applicant 필 or agent 필 file reference SGG-1716-PCT	Date stamp of the IPEA	
Applicant HarexInfotech Inc.		
CALCULATION OF PRESCRIBED FEES		
1. Preliminary examination fee	EUR 159	<div style="border: 1px solid black; width: 20px; height: 15px; display: flex; align-items: center; justify-content: center;">P</div>
2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>)	EUR 129	<div style="border: 1px solid black; width: 20px; height: 15px; display: flex; align-items: center; justify-content: center;">H</div>
3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> EUR 288 </div>	
<div style="border: 1px solid black; width: 100px; margin: 0 auto; padding: 2px 5px;">TOTAL</div>		
MODE OF PAYMENT		
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input checked="" type="checkbox"/> cash	
<input type="checkbox"/> cheque	<input type="checkbox"/> revenue stamps	
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons	
<input type="checkbox"/> bank draft	<input type="checkbox"/> other (<i>specify</i>):	
AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT <i>(This mode of payment may not be available at all IPEAs)</i>		
<input type="checkbox"/> Authorization to charge the total fees indicated above.	IPEA/ _____	
<input type="checkbox"/> (<i>This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit</i>) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.	Deposit Account No.: _____	
	Date: _____	
	Name: _____	
	Signature: _____	

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